ROWAN COUNTY TELECOMMUNICATIONS TRAINEE DAILY OBSERVATION REPORT

Report #		

Trainee Name (L, F, Mi) ID# CTO Name (L, F, Mi) ID# Date

RATING INSTRUCTIONS: Rate observed behavior with reference in the Standardized Evaluation Guidelines. Comment on any behavior observed. Specific comments are encouraged for all unacceptable ratings. Check N.O. if that category was Not Observed. If the trainee is not responding to training, check N.R.T. and comment.

RATI	NG SCALE	Shift					P	Position					
		1	2	3	4	5	6	7]	N.O).	N.	R.T.
APPEARANCE													
. General Appeara	nce	1	2	3	4	5	6	7	I	[]]]
ATTITUDE													
. Acceptance of Fe	eedback	1	2	3	4	5	6	7	ı	[]	[]
. Attitude Toward	Communications Work	1	2	3	4	5	6	7	I]	[]
NOWLEDGE													
. Knowledge of D	epartment Policies and Procedures	1	2	3	4	5	6	7	ı	[]	[]
. Knowledge of R	adio/Telephone/Data Transfer System	1	2	3	4	5	6	7	ı	[]	[]
. Knowledge of C	AD system	1	2	3	4	5	6	7	ı	[]	[]
. Knowledge of C	all Prioritization Procedures	1	2	3	4	5	6	7	ı	[]	[]
. Knowledge of Te	elephone Pre-arrival Protocols	1	2	3	4	5	6	7	I	[]]]
ERFORMANCE													
Telephone Skills	– Normal Conditions	1	2	3	4	5	6	7	ı	[]	[]
O. Telephone Skills	- Moderate and High-Stress Conditions	1	2	3	4	5	6	7	ı	[]	[]
1. Interview Skills		1	2	3	4	5	6	7	ı	[]	[]
2. Orientation/Map	Interpretation	1	2	3	4	5	6	7	-	[]	[]
3. Routine Forms:	Accuracy and Completeness	1	2	3	4	5	6	7	ı	[]	[]
4. Writing Skills		1	2	3	4	5	6	7	ı	[]	[]
	ance - Normal Conditions	1	2	3	4	5	6	7	-	[]	[]
6. Position Perform	ance – Stress Conditions	1	2	3	4	5	6	7	ı	[]	[]
7. CAD Skills – No	ormal Conditions	1	2	3	4	5	6	7	ı	[]	[]
8. CAD Skills – Me	oderate and High-Stress Conditions	1	2	3	4	5	6	7	ı	[]	[]
9. CAD Skills – Up	date and Relay	1	2	3	4	5	6	7	ı	[]	[]
0. EMD Skills – Qu	nestioning and Interpretation	1	2	3	4	5	6	7	ı	[]	[]
1. EMD Skills – Er	nergency Telephone Instructions	1	2	3	4	5	6	7	ı	[]	[]
2. Control of Confl	ict: Voice Command	1	2	3	4	5	6	7	ı	[]	[]
3. Control of Confl	ict: Hysterical Caller	1	2	3	4	5	6	7	ı	[]	[]
4. Problem Solving	Decision Making	1	2	3	4	5	6	7	ı	[]	[]
5. Radio: Appropri	ate Use of Procedures	1	2	3	4	5	6	7	ı	[]	[]
6. Radio: Listen ar		1	2	3	4	5	6	7	-	[]	[]
	ion of Transmission	1	2	3	4	5	6	7	ı	[]	[]
ELATIONSHIPS													
8. With External Co	ustomers	1	2	3	4	5	6	7	ı	[]	[]
9. With Internal Cu	stomers	1	2	3	4	5	6	7	1	[1	ſ	1

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Report	#			

Trainee Name	(L, F, Mi)	ID#	CTO Name (L,	F, Mi)	ID#	Date
Docume	ntation of Perform	mance and Co	omments:			
Cat. #	Comments					
						
	Trainee Signature		Date	CTO Signature		Date
	Reviewed by		Date			